

# UCC-1 Form

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## FILER INFORMATION

*Full name:* **CHRISTINE BUDDNER**

*Email Contact at Filer:* **JLP@PILGRIMTITLE.COM**

## SEND ACKNOWLEDGEMENT TO

*Contact name:* **ORRICK, HERRINGTON & SUTCLIFFE LLP**

*Mailing Address:* **609 MAIN STREET, 40TH FL**

*City, State Zip Country:* **HOUSTON, TX 77002 USA**

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## DEBTOR INFORMATION

*Org. Name:* **RHODE ISLAND MAYORAL ACADEMY SM BLACKSTONE VALLEY**

*Mailing Address:* **7 FATIMA DRIVE**

*City, State Zip Country:* **CUMBERLAND, RI 02864 USA**

*Org. Name:* **SCHOOL HOLDINGS I, LLC**

*Mailing Address:* **7 FATIMA DRIVE**

*City, State Zip Country:* **CUMBERLAND, RI 02864 USA**

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## SECURED PARTY INFORMATION

*Org. Name:* **U.S. BANK TRUST COMPANY, NATIONAL ASSOCIATION, AS MASTER TRUSTEE**

*Mailing Address:* **100 WALL STREET**

*City, State Zip Country:* **NEW YORK, NY 10005 USA**

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## TRANSACTION TYPE: STANDARD

**CUSTOMER REFERENCE: SOS OF RHODE ISLAND - BVP (BORROWER) - OPEN-END MORTGAGE (FAIRLAWN)**

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## COLLATERAL

SEE SCHEDULE A ATTACHED HERETO AND MADE A PART HEREOF